



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Michael D. Boneau

Appl. No. 09/287,216

Filed: April 5, 1999

For: **Endovascular Support Device and Method**

Art Unit: 3738

Examiner: S. Jackson

Atty. Docket: P106 DIV 3 C

Box Fee Amendment
Assistant Commissioner for Patents
Washington, D.C. 20231

TRANSMITTAL OF AMENDMENT AND REPLY

Transmitted herewith for appropriate action are the following documents:

1. Amendment and Reply Under 37 C.F.R. § 1.111; and
2. One (1) Return Postcard.

The Preliminary Amendment adds claims beyond the number of claims paid for when this application was filed. In particular Applicant has added ten (10) additional claims, including two (2) additional independent claims.

Please charge Deposit Account 01-2525 in the amount of \$336.00 to cover the fee required. A duplicate copy of this sheet is enclosed. If any additional fees are due, the Commissioner is hereby authorized to charge same to Deposit Account No. 01-2525.

It is respectfully requested that the attached postcard be stamped with the date of filing of these documents, and that it be returned via U.S. mail.

Respectfully submitted,

Catherine C. Maresh

Catherine C. Maresh
Registration No.: 35,268
Attorney for Applicants
Medtronic AVE Inc.
3576 Unocal Place
Santa Rosa, CA. 95403
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CERTIFICATE OF MAILING (37 CFR 1.8A)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in the envelope addressed to: Box Fee Amendment, Assistant Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Date: 7/21, 2000

Christine L. Aceves
Christine L. Aceves

\$3738

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code



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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Receipt
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Application of:

Michael D. Boneau

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Assistant Secretary and Commissioner of Patents and Trademarks
Application Processing Division's Customer Correction Branch
Washington, D.C. 20231

TRANSMITTAL OF REQUEST FOR CORRECTED FILING RECEIPT

Dear Sir:

Attached is a copy of the Official Filing Receipt received from the Patent and Trademark Office in the above-noted application for which issuance of a new corrected filing receipt is respectfully requested.

Specifically, there are errors in the correspondence name, and the continuing data. Please correct as follows: (1) Correct Correspondence Name - Medtronic AVE, Inc.; (2) Continuing Data: This application is a continuation of application Serial Number 08/471,738, filed June 6, 1995, now U.S. Patent Number 5,891,190, which is a divisional of Serial Number 08/172,420, filed on December 22, 1993, now abandoned, which is a division of application Serial Number 07/398,180, filed August 24, 1989, now U.S. Patent Number 5,292,331.

Enclosed is a copy of the filing receipt with changes noted.

Respectfully Submitted,

Catherine C. Maresh

Catherine C. Maresh
Registration No. 35,268
Attorney for Applicant

Medtronic AVE Inc.
3576 Unocal Place
Santa Rosa, CA. 95403
(707) 543-0221

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CERTIFICATE OF MAILING (37 CFR 1.8A)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in the envelope addressed to: Application Processing Division's Customer Correction Branch, Assistant Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Date: 7/21, 2000

Christine L. Aceves
Christine L. Aceves

FILING RECEIPT

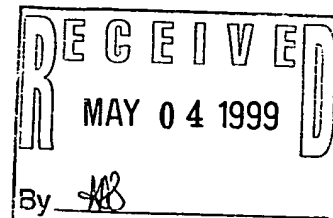


UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
ASSISTANT SECRETARY AND COMMISSIONER
OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/287,216	04/05/99	3738	\$760.00	P106-DIV-3-C	4	1	1

RICHARD L KLEIN
~~MEDTRONIC AVENUE INC~~
3576 UNOCAL PLACE
SANTA ROSA CA 95403

Medtronic AVE, Inc.



Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Application Processing Division's Customer Correction Branch within 10 days of receipt. Please provide a copy of the Filing Receipt with the changes noted thereon.

Applicant(s)

MICHAEL D. BONEAU, CAMPBELL, CA.

CONTINUING DATA AS CLAIMED BY APPLICANT-

~~THIS APPLN IS A CON OF 08/471,738 06/06/95 PAT 5,891,190~~

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 04/27/99

TITLE

ENDOVASCULAR SUPPORT DEVICE AND METHOD

PRELIMINARY CLASS: 623

→ This application is a continuation of application Serial Number 08/471,738, filed June 6, 1995, which is now U.S. Patent Number 5,891,190 which is a divisional of Serial Number 08/172,420, filed on December 22, 1993, now abandoned which is a division of application serial number 07/398,180, filed August 24, 1989, now U.S. Patent Number 5,292,331.

DATA ENTRY BY: SMITH ANNETTE

TEAM: 02 DATE: 04/27/99





Bib Data Sheet


**UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office**

 Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

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SERIAL NUMBER 09/287,216	FILING DATE 04/05/1999 RULE -	CLASS 623	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. P106-DIV-3-C
APPLICANTS MICHAEL D. BONEAU, CAMPBELL, CA ;				
** CONTINUING DATA ***** THIS APPLICATION IS A CON OF 08/471,738 06/06/1995 PAT 5,891,190 WHICH IS A DIV OF 08/172,420 12/22/1993 ABN WHICH IS A DIV OF 07/398,180 08/24/1989 PAT 5,292,331				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 04/27/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 1
INDEPENDENT CLAIMS 1				
ADDRESS RICHARD L KLEIN MEDTRONIC AVENUE INC 3576 UNOCAL PLACE SANTA ROSA ,CA 95403				
TITLE ENDOVASCULAR SUPPORT DEVICE AND METHOD				
FILING FEE RECEIVED 1096	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. o. time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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